

09/19/01

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J1133 U.S. PTO
09/17/01

Please type a plus sign (+) inside this box [+]

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

J1133 U.S. PTO
09/17/01
09/17/01

Attorney Docket No. 42390P11764

First Named Inventor Joshi et al.

Title: _____

Express Mail Label No. EL807366728US

ADDRESS TO: **Assistant Commissioner for Patents**
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. X **Fee Transmittal Form (e.g., PTO/SB/17)**
(Submit an original, and a duplicate for fee processing)

2. _____ **Applicant Claims Small Entity Status. (37 CFR 1.27)**

3. X **Specification (Total Pages 24)**
(preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

EXPT MAIL CERTIFICATE OF MAILING

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D.C.

September 17, 2001
Date of Deposit

April Morley
Name of Person Mailing Correspondence

April Morley
Signature
9/17/01
Date

4. X **Drawings(s) (35 USC 113) (Total Sheets 6)**

5. X **Oath or Declaration (Total Pages 5)**

- a. _____ Newly Executed (Original or Copy)
- b. _____ Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)
 - i. _____ **DELETIONS OF INVENTOR(S)** Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- c. X Unsigned.

6. _____ **Application Data Sheet. (37 CFR 1.76)**

7. _____ **CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)**

8. _____ **Nucleotide and/or Amino Acid Sequence Submission**
(if applicable, all necessary)

- a. _____ Computer Readable Form (CRF)
- b. _____ Specification Sequence Listing on:
 - i. _____ CD-ROM or CD-R (2 copies); or
 - ii. _____ paper
- c. _____ Statement verifying identity of above copies

Express Mail No. EL807366728US

09/17/01 09/17/01

General characteristics		Clinical course		Laboratory data		Histopathology		Immunohistochemistry		Molecular biology		Prognosis					
Parameter	Value	Parameter	Value	Parameter	Value	Parameter	Value	Parameter	Value	Parameter	Value	Parameter	Value				
Age (years)	65	Sex	Male	Duration (months)	12	Location	Colon	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Weight (kg)	70	Family history	No	Stage	II	Size (cm)	5	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Smoking	Yes	Previous surgery	No	Metastasis	No	Depth (cm)	2	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Alcohol	No	Comorbidities	No	Recurrence	No	Width (cm)	3	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Medication	No	Genetic testing	No	Survival (months)	36	Length (cm)	4	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Pathology	Adenocarcinoma	Immunohistochemistry	Positive	Response	Complete	Area (cm²)	12	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Immunohistochemistry	Positive	Molecular biology	Positive	Survival (months)	36	Volume (cm³)	48	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Molecular biology	Positive	Prognosis	Good	Response	Complete	Weight (g)	120	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Prognosis	Good	Response	Complete	Survival (months)	36	Number of lymph nodes	10	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Response	Complete	Survival (months)	36	Recurrence	No	Number of metastases	0	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Survival (months)	36	Recurrence	No	Number of lymph nodes	10	Number of metastases	0	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Recurrence	No	Number of lymph nodes	10	Number of metastases	0	Number of metastases	0	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Number of lymph nodes	10	Number of metastases	0	Number of metastases	0	Number of metastases	0	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Number of metastases	0	Number of metastases	0	Number of metastases	0	Number of metastases	0	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good				
Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good	Immunohistochemistry	Positive	Molecular biology	Positive	Prognosis	Good

- 18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:**

(which is a ___ continuation/ ___ divisional/ ___ CIP of prior application no. _____,
which is a ___ continuation/ ___ divisional/ ___ CIP of prior application no. _____) (List entire chain of priority)

18B. Statement under 37 CFR 3.73(b) for continuing application:

19. Correspondence Address

PTO/SB/05

FEE TRANSMITTAL FOR FY 2001**TOTAL AMOUNT OF PAYMENT (\$)** \$996.00**Complete if Known:****Application No.** _____**Filing Date** Concurrently Herewith**First Named Inventor** Joshi et al.**Group Art Unit** Not yet assigned**Examiner Name** Not yet assigned**Attorney Docket No.** 42390P11764**METHOD OF PAYMENT (check one)**

1. ☒ **The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:**

Deposit Account Number 02-2666**Deposit Account Name** _____

- ☒ **Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17**

- ☐ **Applicant claims small entity status. See 37 CFR 1.27**

2. ☒ **Payment Enclosed:** ☒ **Check**
☐ **Credit Card**
☐ **Money Order**
☐ **Other**

FEE CALCULATION**1. BASIC FILING FEE**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>		
101	710	201	355	Utility application filing fee	<u>710.00</u>
106	320	206	160	Design application filing fee	_____
107	490	207	245	Plant filing fee	_____
108	710	208	355	Reissue filing fee	_____
114	150	214	75	Provisional application filing fee	_____

SUBTOTAL (1) \$710.00**2. EXTRA CLAIM FEES**

		<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	<u>27</u>	- 20** = <u>7</u>	X <u>18.00</u> =	<u>126.00</u>
Independent Claims	<u>5</u>	- 3** = <u>2</u>	X <u>80.00</u> =	<u>160.00</u>
Multiple Dependent				

****Or number previously paid, if greater; For Reissues, see below.**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 286.00

Docket No. 42390P11764

Express Mail No. EL807366728US

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	_____
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	_____
139	130	139	130	Non-English specification	_____
147	2,520	147	2,520	For filing a request for ex parte reexamination	_____
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	_____
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	_____
115	110	215	55	Extension for reply within first month	_____
116	390	216	195	Extension for reply within second month	_____
117	890	217	445	Extension for reply within third month	_____
118	1,390	218	695	Extension for reply within fourth month	_____
128	1,890	228	945	Extension for reply within fifth month	_____
119	310	219	155	Notice of Appeal	_____
120	310	220	155	Filing a brief in support of an appeal	_____
121	270	221	135	Request for oral hearing	_____
138	1,510	138	1,510	Petition to institute a public use proceeding	_____
140	110	240	55	Petition to revive - unavoidable	_____
141	1,240	241	620	Petition to revive - unintentional	_____
142	1,240	242	620	Utility issue fee (or reissue)	_____
143	440	243	220	Design issue fee	_____
144	600	244	300	Plant issue fee	_____
122	130	122	130	Petitions to the Commissioner	_____
123	130	123	130	Petitions related to provisional applications	_____
126	180	126	180	Submission of Information Disclosure Stmt	_____
581	40	581	40	Recording each patent assignment per property (times number of properties)	_____
146	710	246	355	For filing a submission after final rejection (see 37 CFR 1.129(a))	_____
149	710	249	355	For each additional invention to be examined (see 37 CFR 1.129(b))	_____
179	710	279	355	Request for Continued Examination (RCE)	_____
169	900	169	900	Request for expedited examination of a design application	_____
Other fee (specify) _____					_____
Other fee (specify) _____					_____

SUBTOTAL (3) \$0.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:Typed or Printed Name: Mark L. Watson

Signature: _____ Date: _____

Reg. Number: 46,322 Telephone Number: 303-740-1980

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

0955246.091701

Serial/Patent No. _____ Filing/Issue Date: Continuously Heretofore

Officer: Patent Corporation

Title: A Method for Providing Database Security

Serial No. 4239021761 Atty/Secy. initials: Man/Amid

Date Mailed: Sept 17, 2001 Docket Due Date: _____

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

<input checked="" type="checkbox"/> Amendment/Response (____ pgs.)	<input checked="" type="checkbox"/> Express Mail No. <u>EL807366728US</u>	<input checked="" type="checkbox"/> Check No. <u>1220</u>
<input checked="" type="checkbox"/> Appeal Brief (____ pgs.) (in duplicate)	<input checked="" type="checkbox"/> Petition for Extension of Time	Amt: <u>996.00</u>
<input checked="" type="checkbox"/> Application - Utility <u>24</u> pgs., with cover and abstract	<input checked="" type="checkbox"/> Transmittal Statement (P.O. 40) (____ pgs.)	<input type="checkbox"/> Check No. _____
<input checked="" type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)	<input type="checkbox"/> Issue Fee Transmittal	Amt: _____
<input checked="" type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)	<input type="checkbox"/> Notice of Appeal	
<input checked="" type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)	<input type="checkbox"/> Petition for Extension of Time	
<input checked="" type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.)	<input type="checkbox"/> Petition for _____	
<input checked="" type="checkbox"/> Application - Design (____ pgs.)	<input checked="" type="checkbox"/> Postcard	
<input checked="" type="checkbox"/> Application - PCT (____ pgs.)	<input type="checkbox"/> Power of Attorney (____ pgs.)	
<input checked="" type="checkbox"/> Application - Provisional (____ pgs.)	<input type="checkbox"/> Preliminary Amendment (____ pgs.)	
<input checked="" type="checkbox"/> Assignment and Cover Sheet	<input type="checkbox"/> Reply Brief (____ pgs.)	
<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> Response to Notice of Missing Parts	
<input checked="" type="checkbox"/> Declaration & POA (<u>5</u> pgs.) <u>unsigned</u>	<input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business	
<input checked="" type="checkbox"/> Declare Docs & Orig. & Copy of Inventor's Signed Letter (____ pgs.)	<input checked="" type="checkbox"/> Transmittal Letter, in duplicate	
<input checked="" type="checkbox"/> Drawings: <u>6</u> # of sheets includes <u>6</u> figures	<input checked="" type="checkbox"/> Fee Transmittal, in duplicate	
<input checked="" type="checkbox"/> Other: <u>Express mail Certificate</u>		

EL807366728US

"Express Mail" mailing label number: EL807366728US

Date of Deposit: September 17, 2001

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April Worley
(Typed or printed name of person mailing paper or fee)

April Worley
(Signature of person mailing paper or fee)

9/17/01
(Date signed)